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PATENT TRANSMITTAL for FY 2004		Complete if known			
Patent fees are subject to annual revision.		Application Number	10/045,927		
		Filing Date	01/09/2002		
		First Named Inventor	BERG, Thomas B.		
		Examiner Name	MOAZZAMI, Nasser G.		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit	2187		
TOTAL AMOUNT OF PAYMENT (\$110.00)		Attorney Docket No.	BEA920000017US1		
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES			
<input type="checkbox"/> Deposit Account: Deposit Account Number <u>50-0979</u> Deposit Account Name <u>Dilworth Paxson LLP</u>		FEB 25 2004 Technology Center 2100			
The Commissioner is authorized to: (check all that apply)					
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments					
<input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17					
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	\$
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					\$
2. EXTRA CLAIMS FEES FOR UTILITY AND REISSUE					
Total Claims		-21**	= 0	X	= \$0
Independent Claims		- 3**	= 0	X	= \$0
Multiple Independent			+ 290/145=		\$
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					\$0
**or number previously paid, if greater; For Reissue, see above					
SUBMITTED BY CUSTOMER NO. 27730		Complete (if applicable)			
Name (Print/Type)	Darryl W. Shorter	Registration No. (Attorney/Agent)	47,942	Telephone	(215) 575-7000
Signature		Date	February 18, 2004		